



Form M-792
Certificate Releasing
Massachusetts Estate Tax Lien

Rev. 2/98

Massachusetts
Department of
Revenue

Bureau of Desk Audit, Estate Tax Unit PO Box 7023, Boston, MA 02204

File in triplicate with copy of recorded deed.

Mail to:

Name



Street address

City/Town,
State, Zip code

Decedent's first name and initial

Last name

Probate court

Date of death

Docket number

Residence (domicile) at time of death

This certificate releases the lien of the Commonwealth of Massachusetts imposed by Chapter 65C of the General Laws, on any and all interests which the decedent may have had in the property described below:

Real Estate (full legal description not necessary)

Location of property _____
Number Street City/town Zip code

☐ As described by deed dated _____ and recorded in
_____ Book No. _____ Page No. _____, or
Registry of Deeds

☐ As described by certificate of title no. _____ recorded in

Registered land section for _____ County.

COMMISSIONER OF REVENUE

By: _____
Chief, Bureau of Desk Audit